

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JM		3/9/02 3/24/02
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	CM	71632	5/4/00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	02
Original	02
1	N
2	N
3	N
4	✓
5	✓
6	✓
7	N
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If more than 150 claims or 10 actions  
staple additional sheet here

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